

Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: East Carolina University

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): Information Technology and Computing Services, East Carolina University

Address of Service Provider: _____

Name of Agent Designated to Receive
Notification of Claimed Infringement: Martha J. S. Van Scott

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):
Martha J. S. Van Scott, Dir, Office of Technology Transfer, Brody School of Medicine, 186 Warren Life Sciences Bldg., East Carolina University, Greenville, NC 27858

Telephone Number of Designated Agent: (252) 816-2546

Facsimile Number of Designated Agent: (252) 816-3260

Email Address of Designated Agent: vanscottm@mail.ecu.edu

Signature of Officer or Representative of the Designating Service Provider: _____

Date: 7/19/00

Typed or Printed Name and Title: Ernest G. Marshburn, Director, Strategic Initiatives

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee
Made Payable to the Register of Copyrights.**

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